

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Joe Garcia for Congress

Full Name (Last, First, Middle Initial)

Maria Elena Mendez

Mailing Address 10400 SW 108 Ave Apt A313

City

Miami

State

FL

Zip Code

33186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : C8543994

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Raul Mendez

Mailing Address 15925 SW 83 Ct.

City

Miami

State

FL

Zip Code

33157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dade Medical college

Occupation

Chief Operating Officer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
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☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : C8543993

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00